Applicant: Salim Yusuf et al.

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Attorney's Docket No.: 16554-002001 / H310864USCON

Amendments to the Claims:

This listing of claims replaces all prior versions and listings of claims in the application:

Listing of Claims:

- 1. (Currently amended) A method for assessing aspirin resistance in a patient, said method comprising determining the concentration of a metabolite of thromboxane A2 11dehydro thromboxane B2 in a sample of body fluid from the patient; comparing the concentration of the metabolite in the sample to a predetermined set of concentration quartiles comprising a first quartile, a second quartile, a third quartile and a fourth quartile, wherein the first quartile comprises concentrations less than 15.1 ng/mmol creatinine, the second quartile comprises concentrations between 15.1 ng/mmol creatinine and 21.8 ng/mmol creatinine, the third quartile comprises concentrations between 21.9 ng/mmol creatinine and 33.7 ng/mmol creatinine, and the fourth quartile comprises concentrations greater than 33.8 ng/mmol creatinine; and determining within which quartile the sample concentration falls; wherein a concentration of the metabolite within the second, third or fourth quartile is indicative of aspirin resistance and resistance increases with each increasing quartile.
 - 2. (Cancelled)
 - 3. (Cancelled)
- 4. (Currently amended) A method for assessing relative risk of a cardiovascular event in a patient taking aspirin, said method comprising obtaining a sample of a biological fluid from the patient; and determining the concentration of a thromboxane A2 metabolite 11-dehydro thromboxane B2 in the sample; comparing the concentration of the metabolite to a predetermined set of concentration quartiles comprising a first quartile, a second quartile, a third quartile and a fourth quartile, wherein the first quartile has a concentration less than 15.1

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ng/mmol creatinine, the second quartile has a concentration between 15.1 ng/mmol creatinine and 21.8 ng/mmol creatinine, the third quartile has a concentration between 21.9 ng/mmol creatinine and 33.7 ng/mmol creatinine, and the fourth quartile has a concentration greater than 33.8 ng/mmol creatinine; and determining within which quartile the sample concentration falls; wherein the relative risk is increased for a concentration in the second, third or fourth quartile relative to a concentration in the first quartile.

- 5. (Original) The method of claim 4, wherein said patient has arterial vascular disease.
- 6. (Previously presented) The method of claim 4, wherein the concentration of the metabolite is determined using an immunoassay.
- 7. (Previously presented) The method of claim 6, wherein the immunoassay is an ELISA, an RIA or a fluoroimmunoassay.
 - 8. (Original) The method of claim 4, wherein the biological fluid is urine.
 - 9-15. (Cancelled)
- 16. (Currently amended) The method of claim [[14]] 4, wherein the cardiovascular event is a composite of myocardial infarction, stroke and cardiovascular death and the relative risk is 1.3 times for a concentration in the second quartile, 1.4 times for a concentration in the third quartile, and 1.8 times for a concentration in the fourth quartile as compared to that for a concentration in the first quartile.

17-19. (Cancelled)

20. (Previously presented) The method of claim 1, wherein aspirin resistance correlates with risk of a cardiovascular event, and relative risk of a cardiovascular event increases with each increasing quartile.

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21. (Previously presented) A method for determining relative risk of a cardiovascular event, said method comprising determining the concentration of 11-dehydro thromboxane B2 in a urine sample from a patient and determining whether the concentration exceeds 15.1 ng/mmol creatinine, wherein a concentration at greater than 15.1 ng/mmol is indicative of an increased risk relative to a concentration at less than 15.1 ng/mmol creatinine.

- 22. (Previously presented) The method according to claim 21, wherein the cardiovascular event is myocardial infarction and a sample concentration at greater than 33.7 ng/mmol is indicative of a relative risk of 2 times compared to a concentration at less than 15.1 ng/mmol.
- 23. (Previously presented) The method according to claim 21, wherein the cardiovascular event is stroke and a sample concentration at 15.1 to 21.8 ng/mmol creatinine is indicative of a relative risk of 2.5 compared to a concentration at less than 15.1 ng/mmol creatinine.
- 24 (Previously presented) The method according to claim 21, wherein the cardiovascular event is cardiovascular death and a sample concentration at greater than 33.7 ng/mmol creatinine is indicative of a relative risk of 3.5 compared to a concentration less than 15.1 ng/mmol creatinine.